PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

Approved or use introgri 1/31/2/07. And 0031-0032.
U.S. Patent and Trademark Cflice; U.S. DEPARTMENT OF COMMERCE
Under the Papervork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/576,033			ing Date 14/2006	To be Mailed
	Al	D – PART I 1)		SMALL	HER THAN						
Н	FOR	1	NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (ci)	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),		N/A		N/A		N/A		1	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x \$ =	
INE	EPENDENT CLAIM CFR 1.16(h))		minus 3 =		•		x \$ =		1	x s =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$2 addi	ets of pap 250 (\$125 tional 50 :	vings exceed 100 ation size fee due ty) for each tion thereof. See 37 CFR 1.16(s).							
	MULTIPLE DEPEN	7 CFR 1.16(j))]]					
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	09/09/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	* 31	Minus	** 33	= 0	1	X \$26 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 4	Minus	 3	= 1	1	X \$110 =	110	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	110	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
INI		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=	1	x \$ =		OR	x \$ =	
Ĭ.	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x \$ =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					1			1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the ontry in column 2, write 0" in column 3. If the "Highest Number Previously Paid For IR THIS SPACE is less than 30, enter "20". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If th											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the LISPTO to process) an application. Confidentiality is overwined by 80 LSC. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the LUSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U. S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.